

To initiate monitoring, please (1) review the Request for Monitoring Process (2) complete this form; and, (3) send the form to the Chief Information Security Officer at the Indiana Office of Technology, North Government Center Room N551, 100 North Senate Avenue, Indianapolis, Indiana, 46204.

\_\_\_\_\_ I, the Agency Requestor, hereby confirm that I have read and understand the Request for Monitoring Process.

Signature	Date	E-mail
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### Relationship of the Requestor to the Person to be Monitored

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\_\_\_\_\_ I, the Agency Approver, hereby confirm that I have read and understand the Request for Monitoring Process.

Signature \_\_\_\_\_ Date \_\_\_\_\_ E-mail \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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